

PTO/SB/01 (10-01)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DEGLADATION FOR UTILITY OR	Attorney Docket Number	5750-006	
DECLARATION FOR UTILITY OR DESIGN	First Named Inventor	Lesley O. Bond	
PATENT APPLICATION	COMPLETE IF KNOWN		
(37 CFR 1.63)	Application Number	Not Yet Assigned	
X Declaration Declaration	Filing Date	Herewith	
Submitted OR Submitted after Initial with Initial Filing (surcharge	Art Unit	Not Yet Assigned	
Filing (37 CFR 1.16 (e)) required)	Examiner Name	Not Yet Assigned	

		requirea)	Examiner ivame		
As the below name	d inventor, I her	reby declare that:			
My residence, mailing	g address, and c	citizenship are as stated belo	ow next to my name.		
I believe I am the orig	ginal and first inv	ventor of the subject matter v	which is claimed and for whi	ich a patent is soug	ght on the invention entitled:
METHOD AND APPARATUS FOR MECHANICALLY PERFORATING A WELL CASING OR OTHER TUBULAR STRUCTURE FOR TESTING, STIMULATION OR OTHER REMEDIAL OPERATIONS					
		(Title of the la	'nvention)		
the specification of which is attached hereto					
OR was filed on (MM/DD/YYYY) as United States Application Number or PCT International					or PCT International
Application Number		and was amended on (MM/DD/YYYY) (if applicable).			
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.					
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.					
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.					
Prior Foreign A Number		Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO
Additional foreig	n application nu	mbers are listed on a supple	emental priority data sheet f	PTO/SB/02B attack	hed hereto:

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

PTO/SB/01 (10-0.1)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DEGEARATION -	- 011			ii i atelit Ap	Silvation
Direct all correspondence to: X Customer Number or Bar Code Label 23547 OR Correspondence address below					
		PATENT: TRADEHARK	OFFICE		
Name					
Address			*		
City			State		ZIP
Country	Tele	phone			Fax
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR		A petition h	as bee	en filed for this unsign	ned inventor
Given Name Lesley O. Family Name Bond or Surname					
Inventor's Signature Date /0 /22/0			Date 10 / 22/0		
Neosho Residence: City		MO State		United States Country	United States Citizenship
707 Peterson Road					
Neosho City		MO State		ZIP 64850	United States Country
NAME OF SECOND INVENTOR:		A petition ha	s been	filed for this unsigne	d inventor
Given Name (first and middle [if any]) Family Name or Surname					
Inventor's Signature Date					
Residence: City		State		Country	Citizenship
Mailing Address					
City		State		ZIP	Country
Additional inventors are being named on the	sur	pplemental Addition	onal Inve	entor(s) sheet(s) PTO/SB/	02A attached hereto.





Please type a plus sign (+) inside this box

PTO/SB/81 (02-01)

Approved for use through 10/31/2002 OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number.

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

	1	
Application Number	Not Yet Assigned	
Filing Date	Herewith	
First Named Inventor	Lesley O. Bond	
METHOD AND APPARATUS F Title TUBULAR STRUCTURE FOR	OR MECHANICALLY PERFORATING A WELL CASING TESTING, STIMULATION OR OTHER REMEDIAL OPER	R OTHE
Group Art Unit	Not Yet Assigned	
Examiner Name	Not Yet Assigned	
Attorney Docket Number	5750-006	,

I hereby appoint:				
X Practitioners at Customer Number 2354	NO 18 18 4 Tode			
OR	Label here			
Practitioner(s) named below:				
Name	Registration Number			
as my/our attorney(s) or agent(s) to prosecute the appl business in the United States Patent and Trademark O				
Please change the correspondence address for the abo				
X The above-mentioned Customer Number.	or a demined application to.			
OR	Place Customer			
Practitioners at Customer Number Number Bar Code Label here				
OR Sim or				
Firm <i>or</i> Individual Name				
Address				
Address				
City	State Zip			
Country	T 1			
Telephone	Fax			
l am the:				
Applicant/Inventor.				
Assignee of record of the entire interest. See 37 CFR 3.71.				
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).				
SIGNATURE of Applicant or Assignee of Record				
Name Lesley O/Bond	(
Signature Signature				
Date 10 2 2 2001				
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.				
Total offorms are submitted.				

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.